L02000033660

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COVER LETTER

	istration Sec ision of Corp											
SUBJECT:	AUTO COI	LISION EXPERTS, LLC										
JOBOLE I.		Name of Lim	ited Liability Company									
		Amendment and fee(s) are sub-	-									
Please return	all correspon	ndence concerning this matter	to the following:									
			Name of Person									
		HALIFAX LAW GROUP										
		Firm/Company										
		P.O. BOX 9357										
			Address									
		DAYTONA BEACH, FL	32120									
		ECDVICES ALL WAY	City/State and Zip Code									
		ESERVICES@HALIFAXE	to be used for future annual report notific	cation)								
For further in	nformation co	oncerning this matter, please ca										
ASHLEY D	. MASON		386 492-4880 at ()									
	Name of	Person	Area Code Daytime	Telephone Number								
Enclosed is a	a check for th	e following amount:										
□ \$25.00 F	iling Fee	■ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)								

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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(Name of the Limited Liability Company as it now appears on our records.)

(AF	lorida Limited I	Liability Company)			
The Articles of Organization for this Limited Liabil Florida document number L02000033660	ity Company 	were filed on DECE	MBER 16, 20	602 a	nd assigned
This amendment is submitted to amend the following	ıg:				
A. If amending name, enter the new name of the	limited liab	ility company here:			
ST. GELAIS HOLDINGS, LLC					
The new name must be distinguishable and contain the words	"Limited Liabil	lity Company," the design	nation "LLC" o	r the abbreviat	ion "L.L.C."
Enter new principal offices address, if applicable	·:				
		372 NAVAJO ROA	.D		
		ORMOND BEACH	I. FL 32174	至原	19
Finter new mailing address, if applicables				1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	o	372 NAJAVO ROA	.D	- 16.	- M
	2	ORMOND BEACH	, FL 32174	- : : : : : : : : : : : : : : : : : : :	
			r records,	ORD ORD enterathe r	ယ္ name of the n
Name of New Registered Agent:	AYTONA RE	EGISTERED AGENTS	S, LLC		.
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter-the name of the registered agent and/or the new registered office address here: Name of New Registered Agent: DAYTONA REGISTERED AGENTS, LLC New Registered Office Address: Enter Florida street address Enter Florida street address					
		Enter Florida s	treet address		
<u>12</u>	AYTONA BI	EACH	, Flori	da <u>32118</u>	
		City		Zip	Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

Dethanging Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR =	Manager
AMBR =	Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ Add
			□ Remove
			Change
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ective date, if other than the offective date is listed, the date must	ate of filing:	at ha neige to do		(opti	onal)	606	. 0.20.
te: If the date inserted in this blo-	ck does not meet t	he applicable:	statutory filing r	equirements, this	s date will no	ot be liste	ed as
cument's effective date on the De	artment of State	s records.					
record specifies a delayed	effective date.	. but not an	effective tin	ne. at 12:01 a	a.m. on th	e earlie	er o
he 90th day after the reco	rd is filed.			,	_		
, June 14	20)19					
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Filing Fee: \$25.00